## Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	10/23/2009 New & 09/02/2009 Renewals
	(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
	<u>Coverage</u>	Volume (Illinois)*	Change (+ 61 -)
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass		RECEIVED
6.	Fidelity		
7.	Surety		STATE OF ILLINOIS
8.	Boiler and Machinery		STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD
9.	Fire		DEPARTMENTELD
	Extended Coverage Inland Marine		
	•	#C 004 072	6.1%
	Homeowners	\$6,924,873	0.176
	Commercial Multi-Peril		
	Crop Hail		
10.	OtherLine of Insurance		
	es filing only apply to certain territory (to	erritories) or certain classes? If so, spe	cify:
	ef description of filing. (If filing follows raduce minimim premium for HO-2 and HO-3, revis		· · · · · · · · · · · · · · · · · · ·
revis	se territory factors, base rate change.		
	ljusted to reflect all prior rate changes. hange in Company's premium level wh	ich will result from application of new ra	ates.
		Citizen	s Insurance Company of America
			Name of Company
		Susar	n Whitworth - Product Specialist
			Official – Title

## Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	vel produced by rate revision effective	10/23/2009 New & 09/02/2009 Renewals
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial     </li> <li>Automobile Physical Damage</li> </ol>		
Private Passenger Commercial		RECEIVED
3. Liability Other Than Auto		RECEIVE
4. Burglary and Theft		
5. Glass		111 9 1 2009
6. Fidelity		JUL 3 1 2009
<ul><li>7. Surety</li><li>8. Boiler and Machinery</li></ul>		STATE OF ILLINOIS
9. Fire		STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD
10. Extended Coverage		DEPARTMENT OF SPRINGFIELD
11. Inland Marine		
12. Homeowners	\$1,725,088	-0.6%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (the Applies to all territories	territories) or certain classes? If so, spec	cify:
Brief description of filing. (If filing follows r Introduce minimim premium for HO-2 and HO-3, mod	ates of an advisory organization, specif	
introduce minimum premium for the 2 and the 6, mee	any optional winds han deductible lactors and revise	tolikely tustore.
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wl		ates.
	Citize	ns Insurance Company of Illinois
	-	Name of Company
	Susai	n Whitworth - Product Specialist
		Official Title

- Revised Eff. date -

Form (RF-3)

#### SUMMARY SHEET

(	Change in Company's premium or rate	level produced by rate revision effective	09/11/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	OFIVED	
2.	Automobile Physical Damage Private Passenger Commercial	RECEIVED	
3.	Liability Other Than Auto	AUG 2 0 2009	
4.	Burglary and Theft	HUU W ZUW	
5.	Glass	STATE OF HANDIS	
6.	Fidelity	STATE OF ILLINOIS DEPARTMENT OF INSURANCE	
7.	Surety	SPRINGFIELD	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$582,231	+15.1%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (ter	rritories) or certain classes? If so, specify:	
Revi	ised Base Rates for HO 00 03 ar	rates of an advisory organization, specify on the HO 00 05. Replaced Insurance Broducing Wind/Hail Deductible Opto HO 00 06.	Sureau Score Rule with

Fidelity Natl P & C Ins Co
Name of Company

Linda Kinney, P A Supervisor
Official - Title

Adjusted to reflect all prior rate changes. Change in Company's premium level which will

result from application of new rates.

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	inge in Company's premium or rate level	produced by rate revision effective _	10/23/2009 New & 09/02/2009 Renewals
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial	R	ECEIVED
3.	Liability Other Than Auto		
4.	Burglary and Theft		4 2000
5.	Glass		JU <del>L 3 1 2009</del>
6.	Fidelity		
7.	Surety		STATE OF ILLINOIS
8.	Boiler and Machinery	DEP/	
9.	Fire		SPRINGFIELD
	Extended Coverage		
	Inland Marine		
	Homeowners	\$704,144	5.4%
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
	es filing only apply to certain territory (terries to all territories	itories) or certain classes? If so, spec	sify:
	ef description of filing. (If filing follows rate		
	duce minimim premium for HO-2 and HO-3, revise of	current all peril deductible factors, modify option	ai wind/naii deductible factors,
revis	se territory factors, base rate change.		
	ljusted to reflect all prior rate changes. hange in Company's premium level whic	h will result from application of new ra	ates.
		н	anover Insurance Company
			Name of Company
		Susar	Whitworth - Product Specialist
			Official – Title

#### SUMMARY SHEET

Change	in	Company's	premium	or	rate	level	produced	Ъу	rate	revision
effecti	ve_	October	1, 2009				•	-		

	(1).	(2)	(3)
		Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		·
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		<i>*</i>
12.	Homeowners	\$ 6,463,878	7.5%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other		
	Line of Insurance		
Doe	es filing only apply to certain t	erritory (territories)	or certain classes?
If	so, specify: No. Applies to all	territories.	
			, ,
Bri	lef description of filing. (If	filing follows rates of	an advisory
OF	ganization, specify organization	Rate adjustment to	the base premiums.
			<del></del>
		·	ı

RECEIVED Madison Mutual Insurance Company
Name of Company

AUG 3 1 2009

Ed Sprehe - Underwriting Manager
Official - Title

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

<sup>\*</sup>Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

# FORM (RF-3)

## SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	· Volume (mmors)	· Ollarige (101)
Passenger		
Commercial		
Automobile Physical Damag	And the second	ECEIVED
Private Passenger	R	ECEIAFE
Commercial		
Liability Other Than Auto		2000
Burglary and Theft		AUG 2 0 2009
Glass		OF HINOIS
Fidelity		STATE OF ILLINOIS PARTMENT OF INSURANCE SPRINGFIELD
Surety	DEI	SPRINGFIELD
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners	4,199,207	+24.1%
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to certa Classes? If so, specify:	ain territory (territories) o	or certain
Brief description of filing. (If Organization, specify	filing follows rates of an	advisory
	This is a new Rates	& Rules filing entirely replacing
organization, specify organization): previous filing which was effective		
organization):	Feb 1, 1999 with our new m	nodel, 200201. This model incl
organization):  previous filing which was effective updated factors, rating variables, t *Adjusted to reflect all prior rational	Feb 1, 1999 with our new moase rate changes, as well a ate changes.	nodel, 200201. This model incliss a completely redone rule set.
organization):  previous filing which was effective updated factors, rating variables, t *Adjusted to reflect all prior re	Feb 1, 1999 with our new moase rate changes, as well a ate changes.  mium level which will res	s a completely redone rule set.
organization):  previous filing which was effective updated factors, rating variables, t *Adjusted to reflect all prior rational	Feb 1, 1999 with our new moase rate changes, as well a ate changes.  nium level which will res  Progressive Insu	nodel, 200201. This model incliss a completely redone rule set. sult from application of neverance
organization):  previous filing which was effective updated factors, rating variables, t *Adjusted to reflect all prior rational	Feb 1, 1999 with our new moase rate changes, as well a ate changes.  The result of the	nodel, 200201. This model incles a completely redone rule set.

Revised after initial Submission

### **SUMMARY SHEET**

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)	Change (+ or -)
1.	Automobile Liability		
	Private Passenger		
_	Commercial		<u> </u>
2.	Automobile Physical Damage Private Passenger	•	
	Commercial		EIVED
3.	Liability Other Than Auto	BEC	
<i>3</i> . 4.	Burglary and Theft		
5.	Glass		PARC .
6.	Fidelity	JUL -	2 9 2009
7.	Surety		
8.	Boiler and Machinery	TATE	E OF ILLINOIS ENT OF INSURANCE ENT OF INSURANCE PRINGFIELD
9.	Fire	SEPARTM	ENTUGEIELD
0.	Extended Coverage	- OEI - S	Phus
1.	Inland Marine		
2.	Homeowners	\$29,183,958	0%
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
	Tita a auto anniu ta aantain tamitam (tam	ritories) or certain classes? If so, specify:	
ves i	ining only apply to certain territory (terr	nones) of certain classes: If so, specify.	
ief.	description of filing. (If filing follows r	ates of an advisory organization, specify of	organization).
	g rule revisions.	ates of all advisory organization, specify c	ngamzation).

Safeco Insurance Company of Illinois
Name of Company

Julia Schroeder – Product Manager Official - Title